

AMERICAN MEDICAL RESPONSE®

TESTIMONY OF ALFRED DELLA VALLE BEFORE THE APPROPRIATIONS COMMITTEE

DECEMBER 9, 2009

Good Afternoon. My name is Alfred Della Valle. I am the Vice President for Government Relations at American Medical Response, Inc. ("AMR"). AMR is the nation's largest provider of emergency medical services. On behalf of AMR, I would like to thank you for the opportunity to comment on the State's budget deficit and recent proposals to mitigate the deficit by reducing Medicaid reimbursements.

Once again I am compelled to write to you in an effort to ward off any cuts in the provision of emergency and non emergency ambulance services relative to our state budget cuts. As we are already providing these services to Department of Social Service recipients well under cost, any further cuts will certainly affect the level of service and the number of ambulances available to the general public.

AMR, as you know, is the largest ambulance provider in the state of Connecticut and currently serves the major municipalities which include the highest numbers of Medicaid eligible residents. For us to take a reduction in reimbursement for providing such services will be devastating.

Such revenue loses cannot be made up by other payers especially given the uncertainty of maintaining Medicare rates as the Federal Government is pushing healthcare reform and continued debate may result in the loss of Medicare reimbursement through the Medicare Fee Schedule and negative productivity adjustments.

While we realize the significance of the budget deficit, we would respectfully suggest that such cuts would jeopardize public safety and the health and welfare of those we serve.

Moreover, the nominal savings obtained by a reduction in ambulance rates would be offset by the increase in additional Medicaid payments to the hospitals and other providers. The longer it takes for ambulance providers to respond to an emergency, the greater potential for more critical patients being delivered to the hospital, resulting in more extensive medical care and longer hospital stays. Likewise, fewer ambulances will result in patients being held at hospitals and other medical facilities for longer periods of time since it will take considerably longer for ambulance providers to respond to these types of non emergency transport requests. In short, a reduction of ambulance reimbursements is not a fiscally sound option.

AMR certainly appreciates the legislature's understanding of the vital role ambulance providers play in the continuum of care of those sick and injured. We will be happy to meet with any legislator who might have any questions on this matter.

Thank you for this opportunity to comment.

Signed:_

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